

## DOE-Flex Bulletin

*The information contained in this Bulletin is intended for DOE-Flex Advisors and Coordinators in responding to questions. The information supplements the guidance in the **Handbook on DOE-Flex** and will be incorporated in the handbook in the near future, at which time this Bulletin will expire and be removed from the **DOE-Flex** web site.*

**No. 3**

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Subject: [Maternity and Paternity](#)

### **1. What is the appropriate type of flexiplace arrangement for an employee who has an absence for maternity or paternity reasons?**

A pregnancy is regarded as a serious health condition; however, normally, most of the time that an employee is pregnant she does not require confinement. When an employee has medical documentation that states that the employee should not commute to work, be confined at home, or is hospitalized during the pre- and post-delivery periods, then the employee should be approved for a medical flexiplace arrangement for those periods in which the employee is able to work, if so requested and the tasks to be performed are appropriate for a flexiplace arrangement.

However, the issue of the type of arrangement is not as clear during the following situations.

a. A pre-delivery period, usually during the first quarter of the pregnancy, when an employee is not feeling well enough to work a full day at the office, but able to work for short periods during the day, or when she is able to work intermittently for a few days at a time, does not necessarily require medical documentation to confirm the employee's health condition or limitations. Normally, an employee is going to request sick leave (or other appropriate leave) for those periods when she is not well enough to work. However, this is a good opportunity to permit the employee to work at home if she feels up to it.

The proper type of arrangement may be either medical or situational, depending on the situation and local practices. If an organization's practice is to place employees on a medical arrangement (which is preferred) when they have a doctor or dentist appointment during part of the day and then work at home for the remainder of the work day, then an employee who is sick part of the day should be reported as being on a medical arrangement for that part of the day in which she is able to work. When an employee is able to work a few days at a time and is approved to work those days at home, then the employee should be on a situational arrangement, since situational arrangements are for periods of limited duration, usually one day to a few days.

Because these situations are often unplanned a day or more in advance, but can be anticipated, it behooves the employee to discuss her situation with her supervisor and try to have work identified in advance and appropriate resources available at home to be able to be approved as a flexiplace arrangement on short notice.

b. The post-delivery period for the mother who has fully recovered when the mother is no longer eligible for a medical arrangement, and a father who desires to spend time with the infant, may be approved for a flexiplace arrangement when the employee wants to work part-time or full-time at home during the remaining period of an authorized maternity/ paternity absence. This situation can be a win-win opportunity for the organization and employee because it allows the mother to return to work earlier than perhaps would otherwise occur and allows the father to continue to be productive (the considerations for this situation are discussed in detail in the answer to the next question).

However, it becomes a problem for organizations that have limited a regular flexiplace arrangement to less than a full-time situation, e.g., for one to three days during a pay period, or do not permit regular arrangements. If the employee works intermittently for a short-term period, such as a week or so, then it would be appropriate to report the employee as situational. But when an employee wants to work for an extended period, e.g., a few weeks, even part-time, then the employee should be reported as being on a regular arrangement. Thus, such organizations should change their policies to permit exceptions for periods of maternity/paternity absence when their flexiplace policies do not provide for extended periods of time.

## **2. Can an employee be on a flexiplace arrangement to bond or care for a newborn or adopted child?**

The Department recognizes that some employees can be productive while caring for infants following the birth or adoption of a newborn, as evidenced by the success of the "Babies-in-the-Workplace" program at the former Oakland Operations Office and the success that some agencies have had with their bringing sick children to the office in designated work space. The "Babies-in-the-Workplace" program allowed infants who were not disruptive to be in the parent's office area up to age 6 months when they usually become restless and more demanding of the parent's time and attention.

Those two programs are in sharp contrast to the Department's guidance in the Handbook on DOE-Flex, which was based on the existing Government-wide guidance at the time: that a flexiplace arrangement "is not a substitute for child or other dependent care arrangements...." The DOE-Flex guidance is to be revised because of the recognition that it is possible to work at home under certain circumstances, including when someone else is available in the home, such as a spouse, grandmother, or nanny, to provide full-time care; during days in which the employee takes leave for a well-baby check-up; or during short-term medical situations in lieu of bringing a sick child to the office.

Based on the "Babies-in-the-Workplace" Program and the revised guidance, supervisors may approve regular arrangements at home on a case-by-case basis. This situation is obviously fraught with potential problems because of the potential distraction that an infant can have on an employee who is trying to work. Thus, it is essential that supervisors have open and frank discussions with employees who are requesting regular arrangements in order to learn what the home situation is and how an employee expects to handle it, as well as monitors those situations that have been approved. If supervisors are not comfortable with such arrangements or it is apparent that an employee is either abusing the privilege or is not performing satisfactorily, they may disapprove or terminate the arrangement. However, supervisors are encouraged to try pilot efforts with trusting, reliable employees who have been excellent performers before ruling them out. It may be that modifications in the employee's work schedule, if feasible, can resolve the situation when someone else can provide care for the child outside of normal work hours. Thus, the Department encourages supervisors and employees to try to work out mutually agreeable win-win situations.

### **3. What is the appropriate type of resources for an employee while on a maternity or paternity absence?**

For organizations that do not provide resources or for organizations that provide the same resources for medical and non-medical absences, this is not an issue. However, for organizations that provide more extensive resources for medical arrangements, including type of equipment, an additional phone line, phone card, and/or support assistance, than situational or regular arrangements, then the following guidance is offered.

- a. When an organization can afford to allow the additional resources to be utilized following a medical release, then it is recommended that they provide an exception to their operating policy or practice for maternity situations, but not paternity situations, since the father will not be on a medical arrangement.
- b. When an organization has limited resources available, then it should communicate to those employees who will be on a maternity absence in advance that it cannot afford the luxury of continuing the additional resources once the employee has been released. This information should be provided in the employee's flexiplace agreement or as an attachment to it.